RELOCATION PLAN The _____ (city/town/village/county) of _____ will provide relocation assistance, as described in 570.496a (b)(2) and in the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended. (city/town/village/county) of _____ will replace all occupied and vacant occupiable low- and moderate-income dwelling units demolished or converted to a use other than as low- and moderate-income housing as a direct result of activities assisted with funds provided under the Housing and Community Development Act of 1974, as amended, and described in 24 CFR 570.496a (b)(1) and in Section 104 (d) of the Housing and Community Development Act of 1974, as amended. All replacement housing will be provided within three years of the commencement of the demolition or rehabilitation relating to conversion. Before obligating or expending funds that will directly result in such demolition or conversion, the _____ (city/town/village/county) of _____ will make public and submit, in writing, to the Department of Administration, Division of Housing, the following information: 1. A description of the proposed activity. 2. The general location on a map and approximate number of dwelling units by size (number of bedrooms) that will be demolished or converted to a use other than as low- to moderate-income dwelling units as a direct result of the assisted activity, and that will be provided as replacement dwelling units. 3. A timetable for the commencement and completion of the demolition or conversion. 4. The source of funding and time schedule for the provision of replacement dwelling units. 5. The basis for concluding that each replacement dwelling unit will remain a low- to moderate-income dwelling unit for at least ten years from the date of initial occupancy. Consistent with the goals and objectives of activities assisted under the Act, the (city/town/village/county) of _____ will take appropriate steps to minimize the displacement of persons from the homes. Adopted by the _____ (city/town/village/county) of _____ Board

Title

PRINTED NAME of Authorized Official

Signature of Authorized Official